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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
 This appln claims benefit of 60/430,994 12/04/2002 *NAB*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*NONE NAB*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Verified and Acknowledged <i>Allozance</i> Examiner's Signature <i>NAB</i> Initials	STATE OR COUNTRY MD	SHEETS DRAWING 10	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 4
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TITLE  
 PCR sample preparation holder and method

☐ All Fees